PART B - FEE(S) TRANSMITTAL

te and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

				UI <u>Fax</u>	(37)	1)-4/3-4003						
INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifications.	correspondence including the correspondence i	or trange the nerwise	nsmitting the ISSU Patent, advance on in Block 1, by (a	ders and notification specifying a new c	of m orres	naintenance fees w pondence address;	and/or (ailed (b) ind	to the current c licating a separa	orrespo ite "FE	endence address as E ADDRESS" for	
CURRENT CORRESPOND		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.										
25461			Certificate of Mailing or Transmission									
SMITH, GAM SUITE 3100, PI 1230 PEACHTI		I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.										
ATLANTA, GA	30309-3592				М	onica Dalt	on				(Depositor's name)	
			•			On Oa	0 1	<u> </u>)		(Signature)	
					<u></u> □	ctober 17,	2007	7			(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE			FIRST NAMED INVEN	_				DOCKET NO. C		CONFIRMATION NO.	
10/798,222					040965.0							
TITLE OF INVENTION		S FAB	RIC WALL PANE	Andy W. Anderson L SYSTEM	JK.		04	,000	013CH			
APPLN. TYPE	SMALL ENTITY	IS	SUE FEE DUE	PUBLICATION FEE I	DUE	PREV. PAID ISSUI	E FEE	FEE TOTAL FEE(S) DU		DATE DUE		
nonprovisional	YES		\$720	\$0		\$0			\$720		01/02/2008	
EXAMINER		ART UNIT		CLASS-SUBCLASS								
PLUMMER, ELIZABETH A 3635				052-582200								
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 				2. For printing on the patent front page, list Smith, Gambrell &								
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a								
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO I	BE PRINTED ON	THE PATENT (print	or typ	pe)						
PLEASE NOTE: Un recordation as set fort	less an assignee is ident th in 37 CFR 3.11. Comp	ified b	elow, no assignee of this form is NO	data will appear on t T a substitute for filin	the page	atent. If an assign assignment.	ee is ide	entified	d below, the do	cument	t has been filed for	
(A) NAME OF ASSI	GNEE		(B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Please check the appropr	iate assignee category or	catego	ories (will not be pr	inted on the patent):		Individual 🖵 Co	orporatio	n or o	ther private gro	ıp entit	y Government	
4a. The following fee(s)	are submitted:		41	o. Payment of Fee(s):	(Plea	ise first reapply ai	ny previ	ously	paid issue fee s	hown a	above)	
Issue Fee				A check is enclosed.								
Publication Fee (No small entity discount permitted)				Payment by credit card.								
Advance Order - # of Copies				The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number(enclose an extra copy of this form).								
5. Change in Entity Sta	*		,									
	s SMALL ENTITY state			b. Applicant is n								
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) tes Pat	will not be accepte ent and Trademark	d from anyone other to Office.	han t	he applicant; a regi	istered a	ttorney	or agent; or the	e assigr	nee or other party in	
Authorized Signature	Dale	is	cher			Date Oct	ober	17,	, 2007			
Typed or printed nam	Dale Lische	r		****		Registration N	No2	8,43	38			
This collection of informan application. Confiden	ation is required by 37 C	FR 1.3 U.S.C	311. The information of the state of the sta	on is required to obtain 1.14. This collection	n or i	retain a benefit by t timated to take 12	he publi	c whic	th is to file (and	by the	USPTO to process) ring, preparing, and	

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.